

the apex of the left lung. We also thought that unmistakable evidence was afforded by auscultation, that the fluid occupied the bronchia of almost the whole of both lungs; it probably having been diffused by imperfect respiratory efforts and gravity throughout that great extent.

In reviewing this case, and taking into consideration all its symptoms, it is apparent that asphyxia had supervened, and would have resulted in death, had the sitting or ordinary recumbent posture been persevered in even for a few moments. The *besoin de respirer* had lost entirely its control over the medulla oblongata, and complete unconsciousness prevented the patient from making any of those instinctive or intelligent efforts that could have resulted in the expulsion of the blood which had shut out the air from the bronchia and air-cells. But so soon as the blood was partially evacuated by the force of gravity, the air rushed into the lungs, aerated a part of the blood in the pulmonary capillaries, sent it forward to the heart, stimulated that organ to action, and thus renewed the circulation. Although most cases of asphyxia—and I think this is the way in which pulmonary hemorrhage generally proves fatal—from pulmonary hemorrhage occur in the absence of medical aid, yet sometimes an opportunity occurs that will enable us to act with sufficient promptness to save life; and I think that the position in which the thorax and head are dependent is the only sure means of evacuating the blood from the bronchia and air-cells, and admitting the air. I cannot refrain from remarking also that cold, applied to a sedative degree to the surface of the chest, has in many instances under my observation contributed very materially in arresting this hemorrhage.

Hydrocele successfully treated. By BEDFORD BROWN, M. D., of Salem, Fauquier Co.—A hydrocele of unusually large dimensions, containing at least a pint and a half of fluid, was subjected to the following operation for its radical cure. All the coats of the scrotum were laid open, by two longitudinal incisions, measuring about two-thirds the length of the tumour, and giving vent to the fluid contents in a full stream. When the vaginal sac had been thoroughly evacuated, the testicle examined and found healthy, a tent of cotton cloth, measuring two and a half inches in length and half an inch in width, was inserted into the vaginal sac, under the most dependent end of the testicle, and left hanging out of that cavity.

The idea was to permit the tent to remain until adhesive inflammation should be excited by its influence, and then remove it before the least indication of suppuration supervened.

In about three days from the operation, and when the vaginal tunics had become enormously thickened by effusion on their surfaces of coagulable lymph, the tent was removed. The two vaginal tunics were perfectly united by adhesion, forever obliterating the vaginal sac.

The above mode of treatment of hydrocele I have found invariably successful, without involving the least danger, and giving but little pain or trouble, with the exception of the subsequent swelling of the coats of the testicle, which can be rapidly reduced by the use of warm-water applications.

Emmenagogue Properties of Chamomile Flowers.—By H. T. BROWN, M. D.—The emmenagogue properties of these flowers seems to have been overlooked by all writers on materia medica, and also by the profession in general, until within the last few years. My attention was first directed to the emmenagogue properties of this article in the spring of 1853, while treating a young lady, who had already arrived at the age of eighteen years, without

having any appearance of the menstrual flow. I was called to remedy this unnatural delay of menstruation, which I endeavoured to do by using such means as had been most efficient in bringing about the natural discharge. Having pursued the usual course of treatment for several days, without any apparent benefit, I was induced to try the tincture of chamomile flowers, which I prepared by infusing two ounces of the flowers in a pint of dilute alcohol. Of this tincture, I directed a teaspoonful to be taken every three hours, using at the same time a liniment composed of tinct. camphor ℥vi , oil turpentine ℥i , spts. ammonia ℥ii , as an external application to the pelvic and lumbar regions. After pursuing this course of treatment about twenty-four hours, there was a very copious catamenial discharge which lasted a few days, giving entire relief to the existing symptoms, and also restoring to the system its former health and vigour.

I have had numerous opportunities of witnessing the effects of the chamomile in obstinate cases of amenorrhœa, and have found it to be one of the most effectual remedies in such cases, both for regulating the recurrence of the flow, and also the amount eliminated at each menstrual period. Whether chamomile possesses the power of determining the flow of blood to the pelvic viscera, or whether its emmenagogue properties are resident in its tonic principle, will be a matter for future investigation.

Tapeworm expelled by Infusion of Pumpkin-seeds.—By D. LEASURE, M. D., of New Castle, Pa.—In this Journal for July, 1854, I reported a case of tænia expelled by infusion of pumpkin-seeds, and mentioned incidentally that the patient's mother had, at an early period of her life, passed a tapeworm under the use of a "secret vegetable remedy, probably male fern."

On the 6th day of April last, I was somewhat surprised to receive from the old lady a tapeworm, twenty-one feet eight inches long, in every respect similar to the one passed by her daughter a little less than a year previously. The head in this instance also was attached to the worm, showing its entire expulsion.

She informed me that, having discovered joints of the worm in her dejections, she resorted to the infusion of the pumpkin-seeds on her own responsibility, and took it in the same manner as previously taken on my prescription by her daughter, viz: a pint of the bruised seed to be infused in three pints of boiling water, and left over night, the whole to be taken next day, the patient fasting in the mean time."

Rheumatism (Rheumatismus vagus seu dolens) successfully treated with Atropa Belladonna. By B. ROEMER, M. D., of Jackson, Madison Co., Tenn.—On the 25th December, 1854, we were called in consultation to Mr. R. F., who had been suffering for twelve weeks with constant rheumatic pains. Mr. F. is a carpenter, about thirty years old; always had good health, and had suffered the first attack in consequence of unusually severe labour. (We may also add that, to judge from his walk, he suffers from ischiatic lameness.) Mr. F. had been attended by different physicians, who did not check the progress of the disease. When we saw him first, he suffered excruciating pains in the back and the loins, which soon changed towards the knee and toes (right leg), from which parts they again resumed their former position in the course of a few hours. Having taken charge of the case, we administered mass. pilul. hydr. gr. v, followed by an infusion of senna, after which the ammoniated tincture of guaiac was given for several days. Finding that the pains rather increased, we discontinued this plan of